## U. S. DEPARTMENT OF LABOR

## Employees' Compensation Appeals Board

In the Matter of QUEEN M. ROBINSON <u>and</u> GENERAL SERVICES ADMINISTRATION, CENTRAL HEATING & REFRIGERATION PLANT, Washington, D.C.

Docket No. 96-2476; Submitted on the Record; Issued August 7, 1998

**DECISION** and **ORDER** 

## Before GEORGE E. RIVERS, WILLIE T.C. THOMAS, A. PETER KANJORSKI

The issue is whether appellant has a ratable hearing loss causally related to noise exposure in her federal employment.

On December 1, 1995 appellant, then a 62-year-old Supervisory Plant Operations Assistant, filed a claim alleging that she sustained hearing loss as a result of noise exposure in her federal employment.<sup>1</sup> The record indicates that appellant worked in the Central Heating and Refrigeration Plant from September 14, 1992 to December 29, 1995 and was exposed to noise from fans, air conditioning, and heating system machinery ranging from 84 to 108 decibels. In support of her claim appellant submitted a fitness-for-duty medical report dated July 14, 1995, which indicated that she had a significant change in her hearing levels from a prior audiogram, and recommended that she consult her personal physician.

The Office of Workers' Compensation Programs referred appellant and medical records to Dr. Ziad E. Deeb, a Board-certified otolaryngologist. In a report dated April 25, 1996, Dr. Deeb provided a history and results on examination. Dr. Deeb diagnosed normal hearing thresholds in both ears in all frequencies except at the 8,000 hertz (Hz) where a mild sensorineural hearing loss was present. Dr. Deeb included a report dated April 24, 1996 and audiogram dated April 23, 1996 from Karen S. Glickman, a clinical audiologist. The audiogram reported hearing loss in the right ear of 20, 15, 10 and 15 decibels (dB) at the frequencies of 500, 1,000, 2,000 and 3,000 Hz respectively. For the left ear, the losses were 15, 5, 15 and 15 dB at the same frequencies. The calibration date of the audiometric equipment was January 30, 1996.

The medical records were referred to an Office medical adviser for evaluation. In a report dated May 14, 1996, the medical adviser opined that appellant had no significant hearing

<sup>&</sup>lt;sup>1</sup> Appellant also alleged that she had developed a breathing problem as a result of exposure to chemical fumes and second hand smoke in her federal employment. The Office, however, has not yet issued its decision on this issue.

impairment in either ear, with only mild loss at 8,000 Hz bilaterally, and concluded that appellant had no ratable hearing impairment. The medical adviser included his calculations in a separate memorandum.

In a decision dated October 16, 1992, the Office advised appellant that it had accepted that her hearing loss was causally related to noise exposure in her federal employment, but the extent of her hearing loss was not sufficient under the appropriate standards to entitle her to an award under 5 U.S.C. § 8107.

The Board finds that appellant does not have a ratable hearing loss causally related to noise exposure in her federal employment.

The Office evaluates industrial hearing loss in accordance with the standards contained in the American Medical Association, *Guides to the Evaluation of Permanent Impairment* using the frequencies of 500, 1,000, 2,000 and 3,000 cycles per second. The losses at each frequency are added up and averaged and the "fence" of 25 decibels is deducted since, as the *Guides* points out, losses below 25 decibels result in no impairment in the ability to hear everyday speech in everyday conditions. The remaining amount is multiplied by 1.5 to arrive at the percentage of monaural hearing loss. The Board has concurred in the Office's use of this standard for evaluating hearing losses for schedule award purposes.<sup>2</sup>

The requirements for the medical evidence used in evaluating hearing loss are set forth in the Office's procedures.<sup>3</sup> In the present case, appellant was referred for evaluation by Dr. Deeb, a Board-certified otolaryngologist. His report and accompanying audiometric testing results meet the requirements established by the Office and were properly used to evaluate appellant's hearing loss. The results from Dr. Deeb show that for the right ear, at the frequencies of 500, 1,000, 2,000 and 3,000 Hz, appellant had dB losses of 20, 15, 10, and 15 decibels. The losses are averaged for a total of 15. As noted above, the fence of 25 must be deducted from the average dB loss, thereby resulting in a 0 percent impairment in the right ear. For the left ear, the average of the dB losses of 15, 5, 15 and 15 equals 12.5, but again the fence of 25 is deducted and the result is a 0 percent impairment in the left ear. Accordingly, the Board finds that the Office properly evaluated the medical evidence in concluding that appellant did not have a ratable hearing loss in this case.

<sup>&</sup>lt;sup>2</sup> See Danniel C. Goings, 37 ECAB 781 (1986).

<sup>&</sup>lt;sup>3</sup> Federal (FECA) Procedure Manual, Part 3 -- Medical, *Requirements for Medical Reports*, Chapter 3.600.8(a) (September 1994). These requirements include a medical examination by an otolaryngologist, with audiological testing by a certified audiologist on equipment meeting the calibration protocol established by the American Speech-Language-Hearing Association (ASHA).

The decision of the Office of Workers' Compensation Programs dated May 28, 1996, is affirmed.

Dated, Washington, D.C. August 7, 1998

> George E. Rivers Member

Willie T.C. Thomas Alternate Member

A. Peter Kanjorski Alternate Member